

# Male Reproductive system

Reproductive Block

## Color Index

**Main Text**

**Male's Slides**

**Female's Slides**


**Important**


**Doctor's Notes**


**Extra Info**

# Objectives

**You should be able to Describe:**

 List the different components of the male reproductive system.

 Describe the anatomy of the **primary & the secondary sex organs** regarding (location, function, structure, blood supply & lymph drainage).

 Describe the anatomy of the **male external genital organs**.

**This lecture was presented by :**

**Prof. Musaad Alfayez**

**Dr. Sanaa Al Shaarawi**



**[You can find more quizzes by Clicking HERE!](#)**

★ Special Thanks to Saleh Aljanah and Abdulaziz Alqarni!



**You can find Atlas by [Clicking HERE!](#)**

# Components of Male Reproductive System

## Male Reproductive System

### Primary Sex organs

Testis

### Accessory Sex Glands

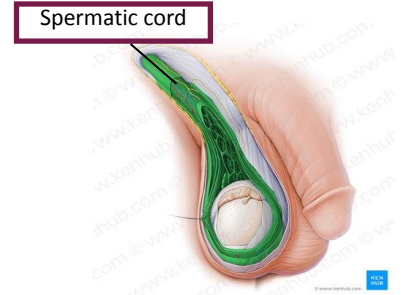
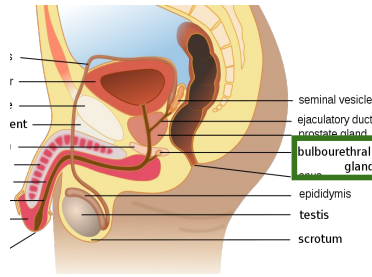
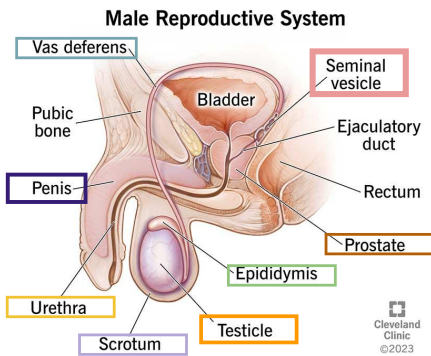
- 1- Seminal vesicles
- 2- Prostate gland
- 3- Bulbourethral glands

### Reproductive Conducting Tract

- 1- Epididymis
- 2- Vas deferens
- 3- Urethra In female slide
- 4- Spermatic Cord

### External Genitalia

- 1- Penis
- 2- Scrotum In female slide



## Scrotum

- » An outpouching of loose skin & superficial fascia.
- » The Left scrotum is lower than the right.

بسبب ان testis اليسرى تنزل قبل اليمنى  
ب شهر

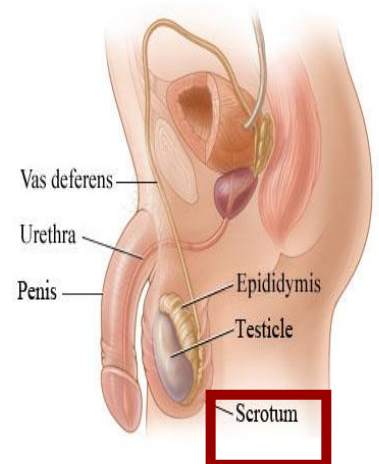
## Functions

Houses & Protects the testis

It has thin skin with sparse hairs and sweat glands.

It Regulates testicular temperature (no superficial fat)

The Dartos muscle lies within the superficial fascia & replaces Scarpa's fascia (superficial fascia of ant. abdominal wall).



لان testis فالأساس كانت ف abdomen لكنها تحتاج تنزل ل scrotum لأن حرارة الجسم (37 درجة) تمنعها تكون sperms والحرارة ف scrotum أقل من حرارة الجسم ب 3 درجات فتصير قادرة على التصنيع

# Testis

## Introduction

- Testis or Testicle (singular), Testes (plural).
- Paired almond-shape gonads.
- Suspended in the scrotum by the **spermatic cord**.
- 4 - 5 cm long and Its weight (10.5 - 14) g and its volume is about 20-25 ml.

## Functions

Spermatogenesis

Hormone production (Androgens - testosterone).

## Coverings of testis

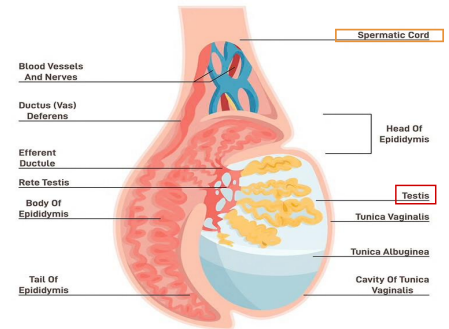
### Tunica Vaginalis (outer):

- ▶ A Peritoneal covering, formed of **parietal** and **visceral** layers.
- ▶ It surrounds testis & epididymis. **It allows free movement of testis inside scrotum.**

### Tunica albuginea (internal):

- ▶ It is a whitish fibrous capsule

## Testis

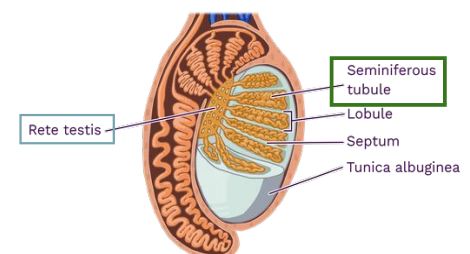
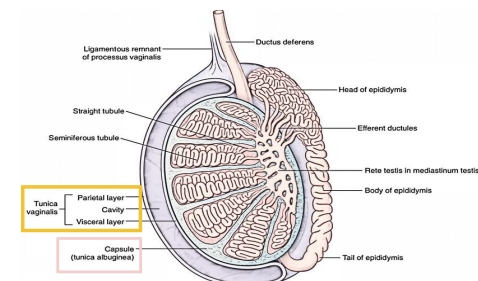


## Internal Structure of Testis

Fibrous septae extend from the capsule, divide the testis into a (200-300) lobules of **testis**. Each lobule contains, (1-3) seminiferous tubules.

**Seminiferous Tubules** : They are the site of the **spermatogenesis** and they form the bulk of testicular tissue.

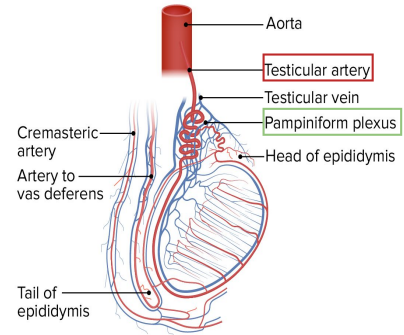
**Rete testis** : (a network of tubules) It is the site of merging of the Seminiferous tubules.



# Supply of the Testis

## Arterial Supply

→ **Testicular artery:** It is a direct branch from the abdominal aorta.



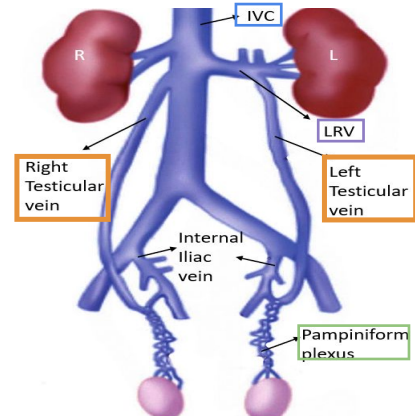
## Venous Drainage

**Pampiniform plexus of veins:** Approximately a dozen veins which forms a network in the spermatic cord.

They become larger, converge as it approached the inguinal canal and form the **Testicular vein**.

Right Testicular Vein drains into **IVC**.

Left Testicular Vein drains into **Left Renal Vein**.



## lymphatics drainage

### Testicular lymphatics

Follow arteries, veins End in **Lumbar (para -aortic) nodes**.

(External genitalia)

Scrotum , penis, prepuce

Terminate in **Superficial Inguinal nodes**.

## Ducts

1

Epididymis

2

Vas deferens

3

Ejaculatory duct & urethra

4

Spermatic cord & cremasteric reflex

# Ducts

## Epididymis

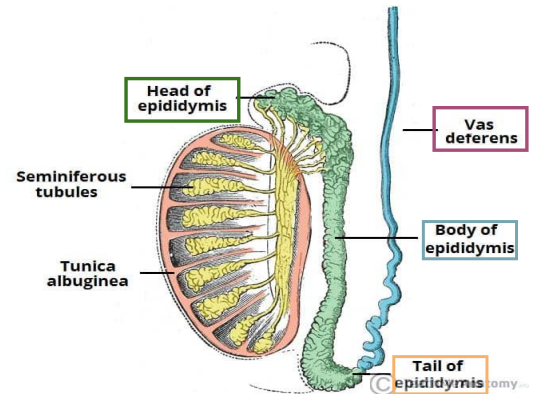
- ➔ A **Single** coiled tubule 6 M long **Located on the posterior & superior margins** of the testis.
- ➔ It is divided into: **Head**, **Body** and **Tail**.
- ➔ The Head receives efferent ductules from testis.
- ➔ The Tail is continuous with **Vas Deferens**.

### Function :

Secretes/absorbs the nourishing fluid.

Recycles damaged spermatozoa.

Stores spermatozoa **Up to 2 weeks to allow for maturation**.

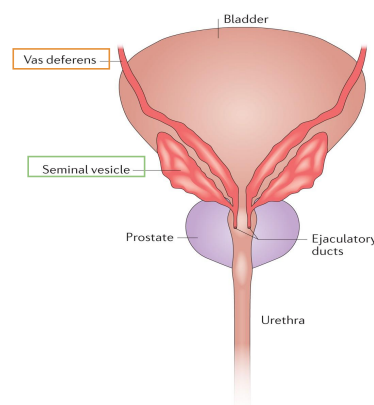
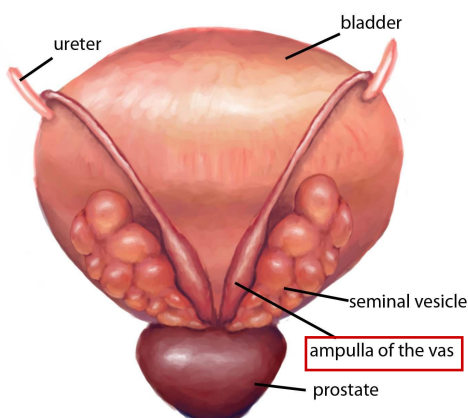


## Vas deferens

- ➔ A Muscular tube 45 cm long.
- ➔ **Carries sperms from the Epididymis to pelvic cavity.**
- ➔ Passes through the inguinal canal and crosses the ureter **in the region of ischial spine.**
- ➔ Its terminal part is dilated to form the **Ampulla of the vas.**
- ➔ It joins the urethra in the prostate

## Ejaculatory duct & urethra

- ➔ Formed by the **union of the lower end of the vas deferens** and the duct of the **seminal vesicle.**
- ➔ Its length is about 1 inch (2.5) cm
- ➔ The 2 ejaculatory ducts open into the **prostatic urethra.**
- ➔ They drain the seminal fluid into the prostatic urethra



## Spermatic cord & cremasteric reflex

### Indication:

- Evaluation of Testicular pain in case of (Testicular Torsion).

### Technique :

- Examiner strokes or pinches upper medial thigh causes cremasteric muscle contraction.

### Observe:

- Rise of the testicle on the same side.

### Interpretation:

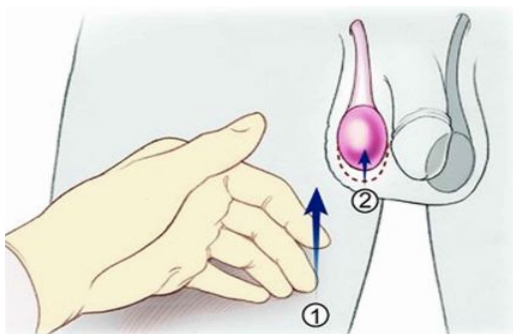
- Normal
- it's present with **Epididymitis**.
- If **Cremasteric reflex absent** (no Testicle rise) :  
It is **Suggestive of Testicular Torsion** in teens.
- Also absent in 50% of boys under age 30 months .  
Do not use this test under age 30 months

### Efficacy :

- Test sensitivity for Testicular Torsion : 99% Assume age over 30 months.

### Nerve involved :

- ➔ **Genitofemoral nerve (GFN) (L1,2)**
- ➔ **Sensory:** femoral branch of (GFN) & Ilioinguinal N.(T12&L1).
- ➔ **Motor:** genital branch of (GFN).



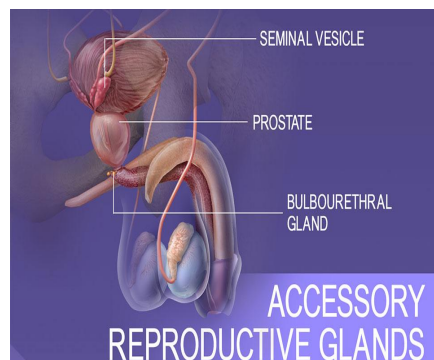
The reflex is elicited by:  
1- Stroking the ipsilateral inner thigh with a tongue depressor or gloved hand, resulting in.  
2- The elevation of the testicle through contraction of cremasteric muscle.  
3- **Affected nerve L1&2 spinal nerves.**

# Accessory gland

## Functions

Secretion of seminal fluid

Nourishing, Activation & protection of sperms



## Composed of:

### Seminal vesicle

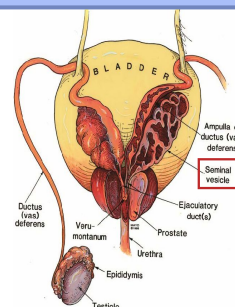
### Bulbourethral gland

### Prostate gland

Paired elongated glands.

Located posterior & inferior to the urinary bladder.

**Secrete (60% of Semen).**



### Seminal vesicle

### Bulbourethral gland

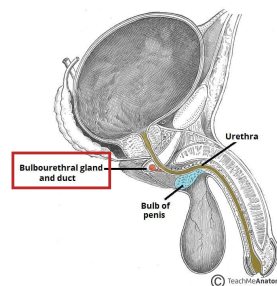
### Prostate gland

Small paired glands

Location at the base of the penis Secrete alkaline mucus for:

-Lubrication

**-Neutralization of urinary acids of female**



### Seminal vesicle

### Bulbourethral gland

### Prostate gland

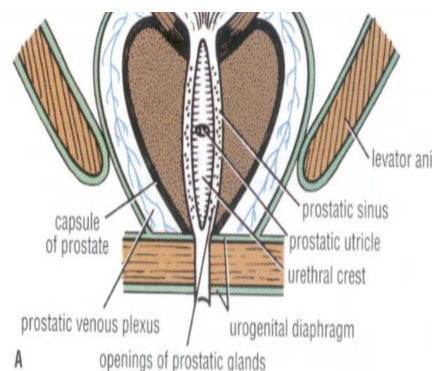
The Largest Male accessory gland.

Shape: Conical and contains

Location: Neck of the bladder Houses the prostatic urethra

Secretes 20-30% of semen

Walnut sized





# Prostate Gland

## Function:

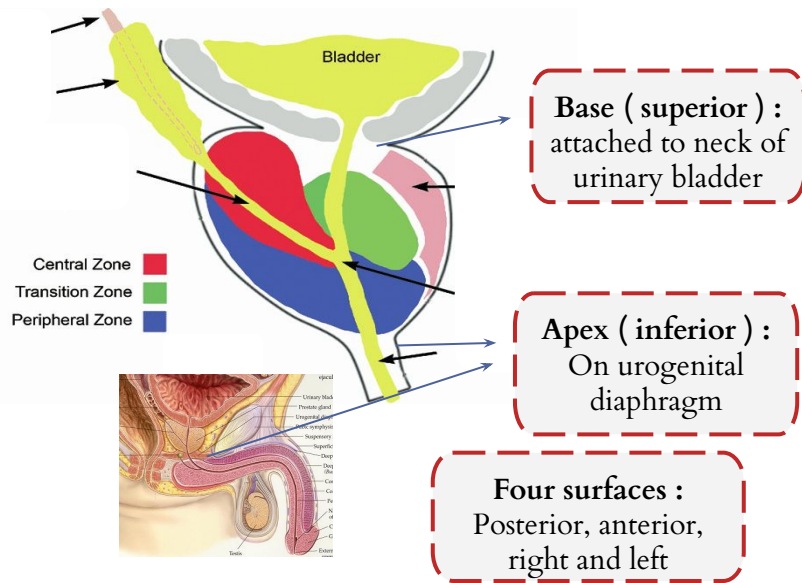
It secretes enzymes that have the following functions:

Aids in activating sperm motility

Mucus degradation

Antibiotic

Neutralizes Alkaline fluid of female reproductive tract



**Base ( superior ) :**  
attached to neck of urinary bladder

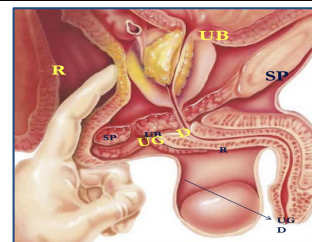
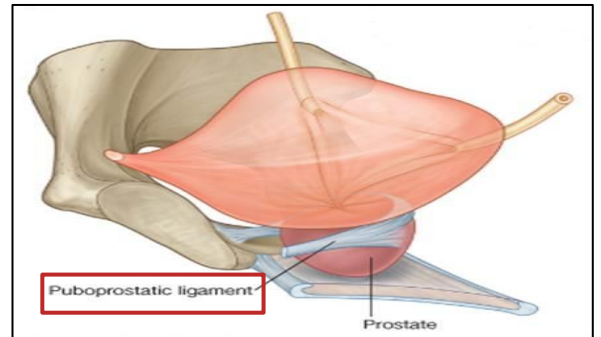
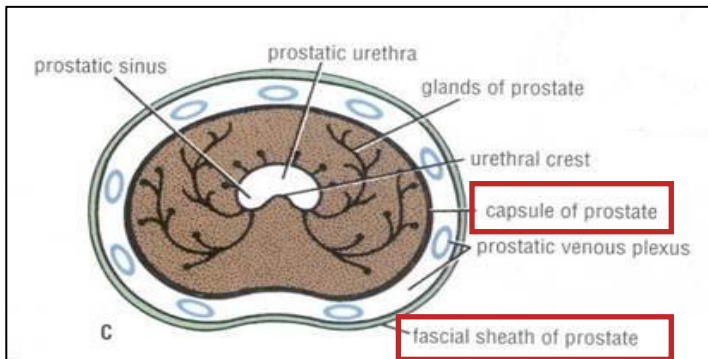
**Apex ( inferior ) :**  
On urogenital diaphragm

**Four surfaces :**  
Posterior, anterior, right and left

## Capsule of the prostate

**Internally:** contains a dense fibrous prostatic capsule

**Externally:** it is surrounded by **fascial / fibrous** prostatic Sheath which is continuous with the puboprostatic ligaments (levator prostate).



## Relations of the prostate

### Surfaces

Lateral	Posterior	Anterior	Superior	Inferior
Medial margins of levator ani muscles (levator prostate)	Rectum ® (important for PR Examination)	Symphysis pubis (SP).	Neck of urinary bladder.	Urogenital diaphragm, (UGD).

# Prostate Gland

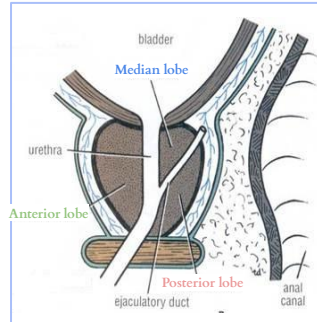
## Lobes (Anatomically)

Anatomically :divided according to their relation to the urethra into (5) lobes:

### Anterior (Isthmus):

Lies anterior to the urethra,  
It is fibromuscular.

1



### Posterior:

Posterior to the urethra and  
Inferior to the ejaculatory  
Ducts.

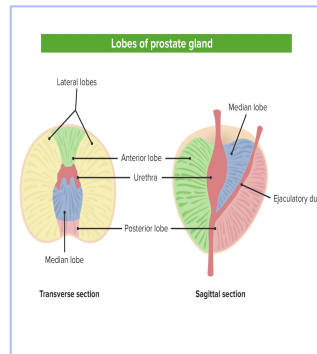
2

### Two Lateral:

On each side of the urethra.

The Median & Lateral lobes are  
Rich in **glandular** tissue.

3



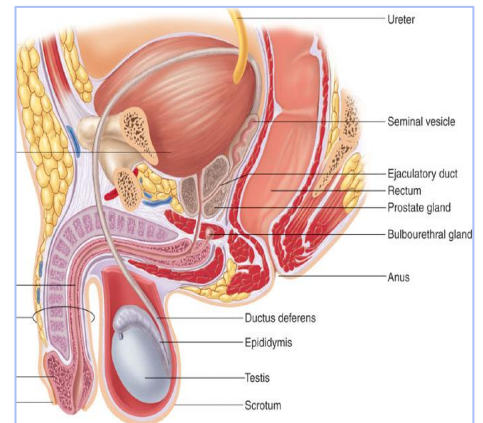
4

### Middle (Median):

Between the urethra and  
Ejaculatory ducts & **closely related  
to neck of Urinary bladder.**

It may project into urinary bladder.

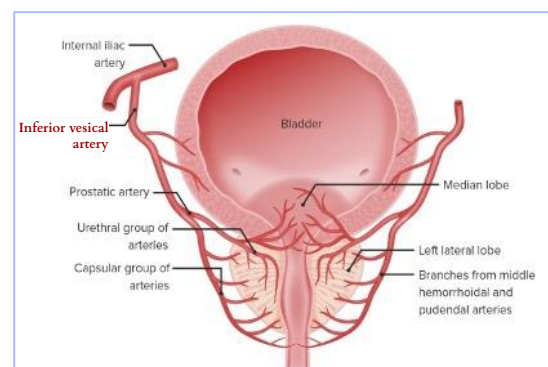
- Urologists & Sonographers, divide the prostate into **Peripheral** and **Central** (Internal) zones.
- The **Central zone** is represented by the Middle lobe.
- Within each lobe are four lobules, which are defined by the ducts and connective tissue



## Supply of Prostate Gland

### Blood supply

- Arterial Supply:** Inferior vesical artery from the internal iliac artery
- Lymph drainage:** Internal iliac lymph nodes.



# Prostate Gland

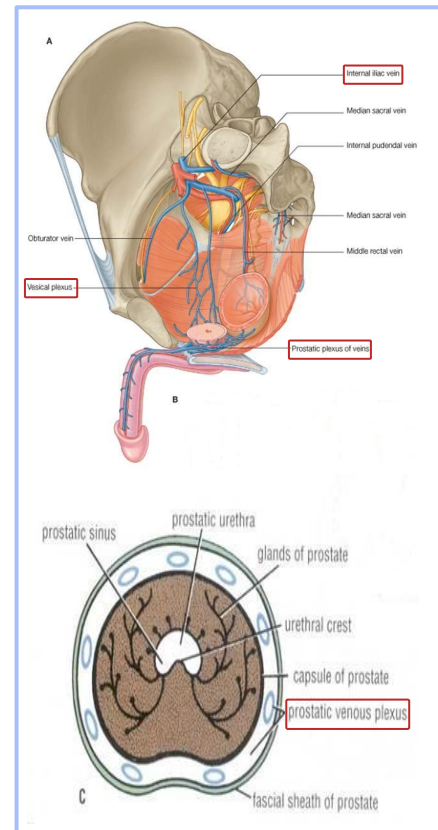
## Venous Drainage

### Prostatic venous plexus:

Lies between the prostatic fibrous capsule and the prostatic sheath.

It drains into the **internal iliac veins**.

It is continuous superiorly with the vesical venous plexus and posteriorly to the internal vertebral venous plexus (IVVP).



## Hypertrophy of the prostate

### » Benign:

- ▶ Common after middle age.
- ▶ An enlarged prostate projects into the urinary bladder and distorts the prostatic urethra.
- ▶ **The middle lobe often enlarges the most**, and obstructs the internal urethral orifice, this leads to nocturia, dysuria and urgency.

### » Malignant:

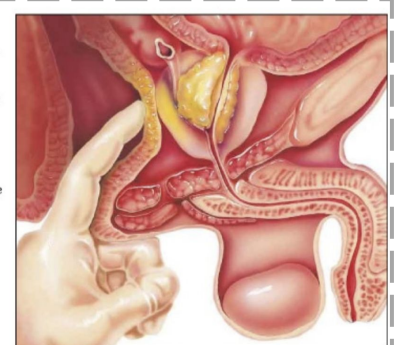
- ▶ It is common after the age of 55
- ▶ The malignant prostate is felt hard & irregular during PR
- ▶ The malignant cells metastasize through lymph and veins. Lymphatic metastasis to Internal iliac & Sacral lymph nodes, Later to distant nodes
- ▶ Venous metastasis to Bone & Brain through (IVVP)

### EXTRA: Palpating the prostate gland

#### PALPATING THE PROSTATE GLAND

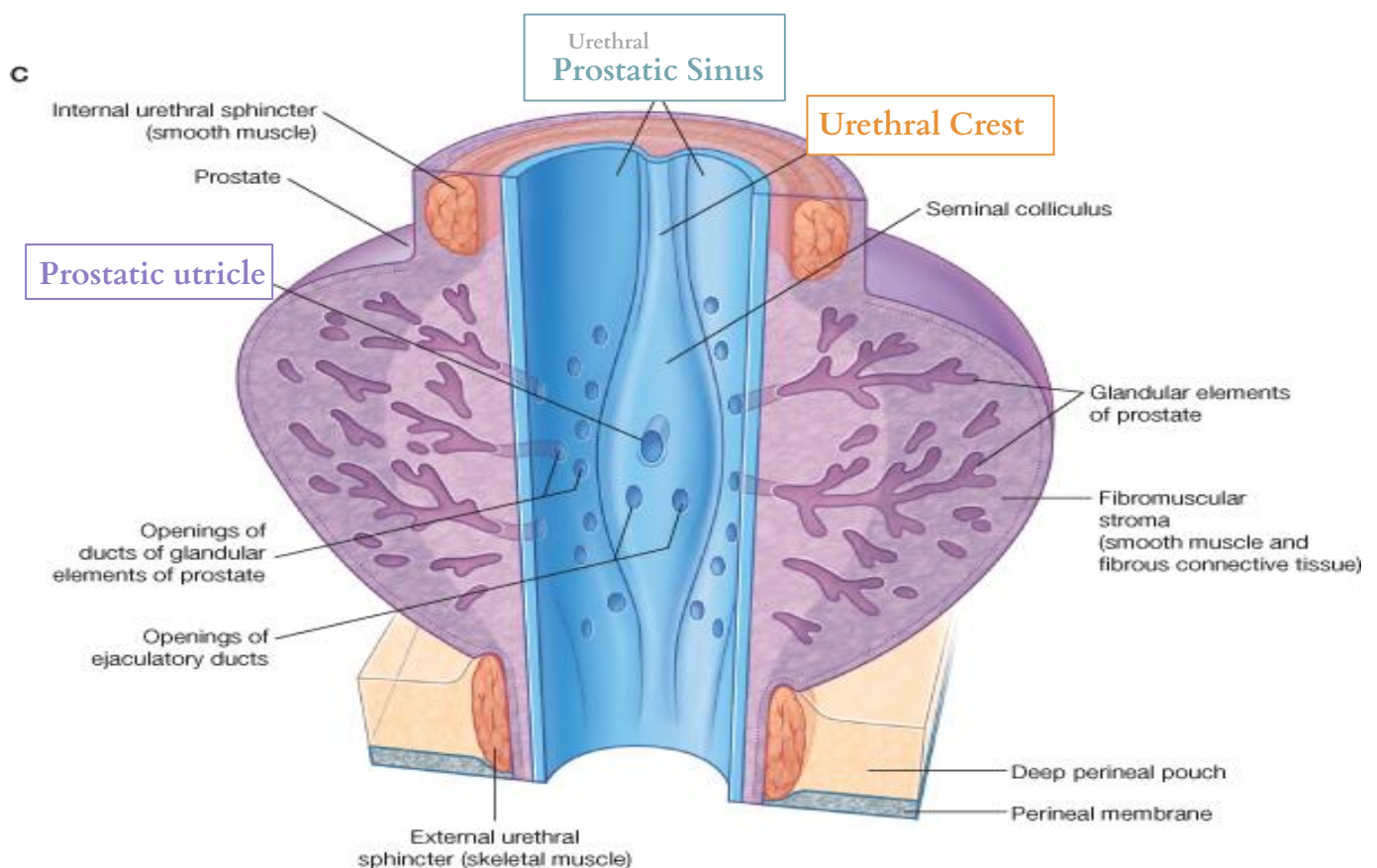
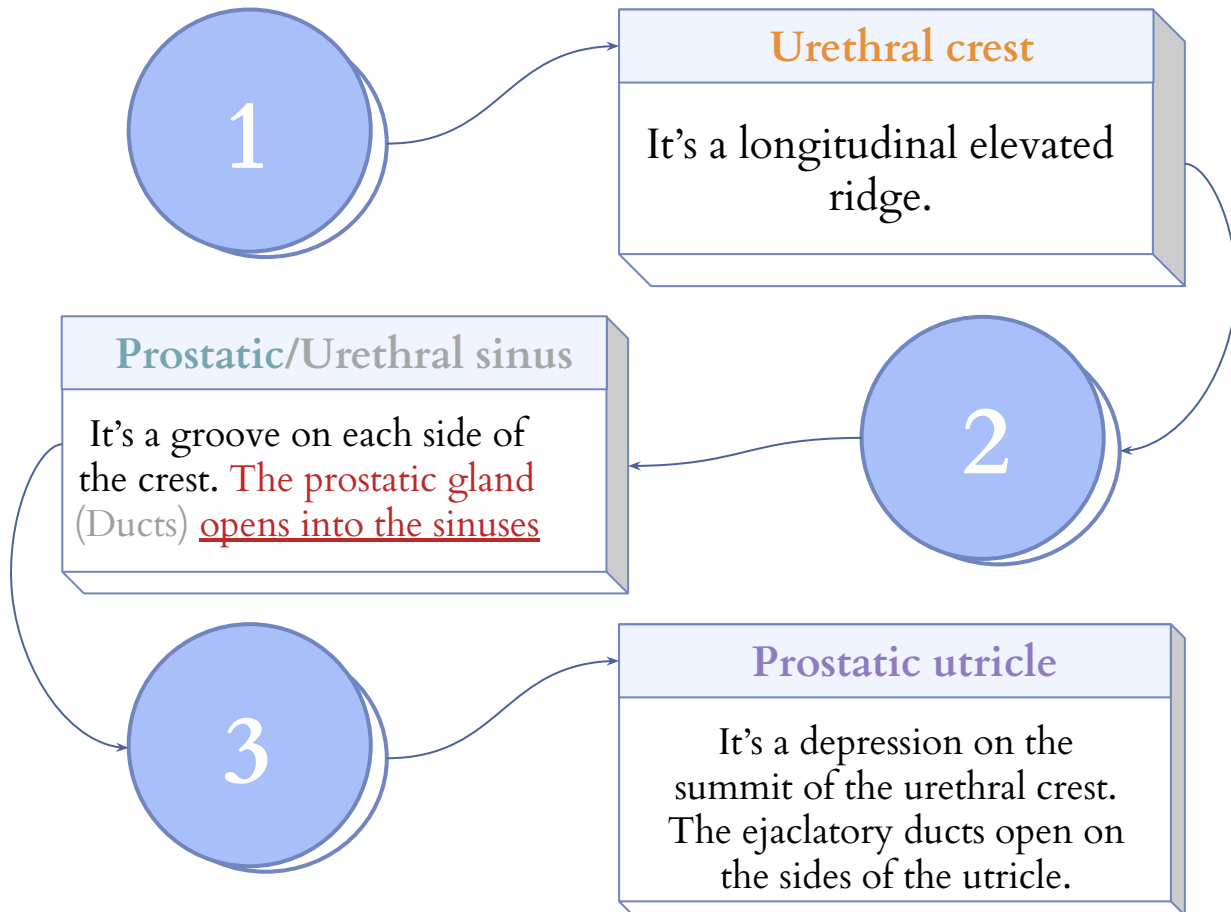
This useful tool in detecting early signs of prostatic enlargement includes the following steps:

- Have patient stand and lean over the exam table; if he can't do this, have him lie on his left side with his right knee and hip flexed or with both knees drawn to his chest
- Inspect the skin of the perineal, anal, and posterior scrotal walls
- Insert lubricated gloved finger into the rectum
- Palpate the prostate through the anterior rectal wall
- The gland should feel smooth and rubbery, about the size of a walnut.



# Prostatic Urethra

Structures seen on its posterior wall:



# External Genitalia (Penis)

## A Copulatory & Excretory organ

**Excretory:** Penile urethra transmits urine & sperm.

**Copulatory:** Has (3) cylindrical masses of erectile tissue

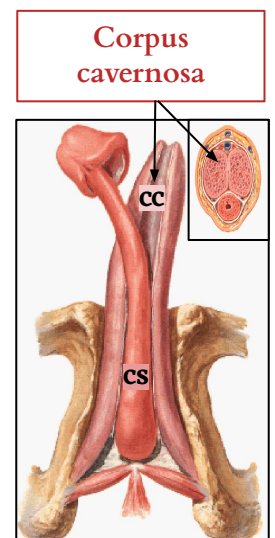
- Two Corpora Cavernosa
- One Corpus Spongiosum (CS)

## Corpora Cavernosa

Superior Paired Right & left masses of **(Primary erectile tissue)**.

They Provide the majority of rigidity & length of penis.

Their Posterior Expansions: form Crura (anchor” tissue) against pelvic bone.



## Corpora Spongiosum

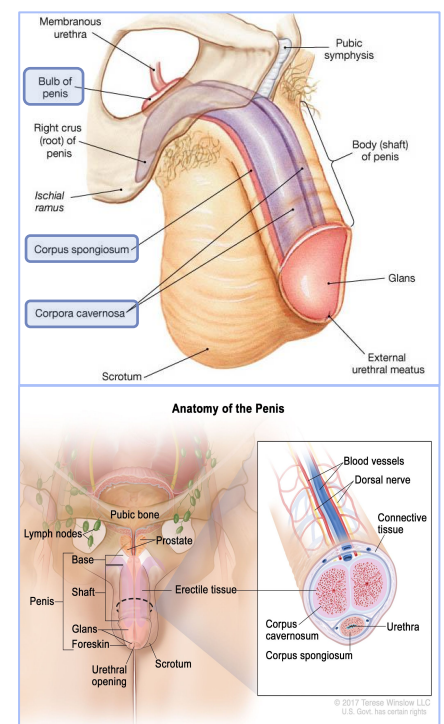
The Inferior mass (A Secondary erectile tissue).

It is Traversed by the Penile urethra

Its **Anterior** expansion forms the **Glans**

Its **Posterior** expansion: forms Bulb of penis

**Prepuce** : Fold of skin covering glans (before circumcision).



# MCQs

Q1- Prostatic ducts open into which of the following?

A- Prostatic utricle

B- Membranous urethra

C- Prostatic sinus

D- Seminal colliculus

Q2- Which one of the following nerves mediates the cremasteric reflex?

A- Ilioinguinal

B- Pudendal

C- Genitofemoral

D- Obturator

Q3- Which one of the following structures allows free movement of the testes inside the scrotum?

A- Tunica albuginea

B- Dartos muscle

C- Tunica vaginalis

D- Cremasteric muscle

Q4- A patient has a seminoma of the testis. Which of the following lymph nodes will be affected?

A- Internal iliac L.N.

B- Superficial inguinal L.N.

C- Paraaortic L.N.

D-Deep inguinal L.N.

Q5- A 42 year old man is suffering from skin carcinoma of the penis. Cancer cells are most likely to metastasize to which of the following lymph nodes?

A- Superficial inguinal L.N.

B- Internal iliac L.N.

C- External iliac L.N.

D-Paraaortic L.N.

Answers: 1-C 2-C 3-C 4-C 5-A

[For Anki flashcards click here](#)



## Team Leaders

Faris Alzahrani

Farah Alanezi

## Sub Leader



Mohammed AlEssa

## Team Members

Faisal Alshowier

Remaz Almahmoud

 Khalid alsobei

Aljoharah Alkhalifah

Mohammed Alarfaj

Renad Saleh Alshehri

Areej Alquraini

Reuf Alahmari

 Layla Alfrhan

Aldanah Abdullah

Aseel alshehri



[Anatomy.med443@gmail.com](mailto:Anatomy.med443@gmail.com)